Fee Structure for Medical Colleges for 1997-98

992. SHRI K. RAHMAN KHAN: Will the PRIME MINISTER be pleased to state:

(a) whether the Medical Council of India has fixed the fee structure for Medical colleges for 1997-98 as per the direction of Supreme Court; if so, what fee structure has been fixed,

(b) the criteria adopted by the Council for fixing the fee structure and whether the expenditure incurred by the colleges for runing the hospitals is also taken into account; and

(c) if the answer to part (a) above be in the negative, the reasons for not fixing the fee structure, so far?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) to (b) As per directions of the Supreme Court, Govt, of India have fixed following upper ceiling of fee for private medical colleges in the country which will be effective from the academic year 1997-98.

Payment scats: An amount of Rs. 1.10 lakh per student per annum (12 months) shall be payable as fee. Out of this amount a sum of Rs. 20,000/- per student, per annum (fixed) in case of colleges which do not have their own hospital facilities and Rs. 7,000/- per student per annum (fixed) in case of colleges having partial hospital facilities will be paid Deck to the Govt./authority running the hospital utilised by such medical colleges.

Free/Merit Scats: Rs. 13,000/- per student per annum shall be payable as fees.

The actual fee to be levied within above ceiling is to be fixed by the State Committee set up by the respective State Governments/UTs. The hospital expenses have also been taken into account while fixing the above ceiling on fees.

Increase in T.B. Oases

993. SHRI RAHASBIHARI BARIK: Will the PRIME MINISTER be pleased to state:

(a) whether Government are aware of the increase in the incidence of Tuberculosis (T.B.) in the country;

(b) whether the disease is spreading in the tribal and mining areas in Orissa, Bihar and Madhya Pradesh; and

(c) if so, the steps taken to provide proper treatment for this disease and to aradicate it?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) There has been no reported increase in the incidence of tuberculosis in the country.

(b) and (c) There is no report of the disease spreading in tribal and mining areas of Orissa, Bihar and Madhya Pradesh.

Indigenous Drug formulation for treatment of Kala Azar

994. SHRI AKHILESH DAS: Will the PRIME MINISTER be pleased to state:

(a) whether it is a fact that a new drug formulation has been made in the country for the first time by an Indian company for the treatment of Kala Azar;

(b) whether this drug formulation has successfully completed trials, to test its safety, toxicity and effectiveness and other necessary' tests; and

(c) by when this drug formulation is likely to be made available in the market?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) Yes, Sir. A new drug delivery system on the liposome based formulation of an old antifungal, anti-leishmenial drug amphotericin B, has been developed for the first time at Liposomal Research